



**Shufflin' Along Foundation & Performing Arts Scholarship Fund  
2018 "Dance Into Your Destiny" Scholarship**

The "Dance Into Your Destiny" (DIYD) scholarship supports local dance studios in Northeast/Northwest, LA that have talented students in their **pre-professional dance** companies and/or must be at least 12 years of age and applicants are financially deserving of the award. The DIYD scholarship is strictly talent based.

"Dance Into Your Destiny" scholarship was birthed in 2014 in honor and memory of Se'Destini Fields who was an extremely gifted and talented dancer in the areas of ballet, African, jazz, tap and modern dance. Se'Destini was tragically taken from us in December 2014.

The recipient of this annual award will be required to file a follow-up report on how he/she has benefited from this scholarship in their 2018-2019 dance season. The recipient will be announced at the SAF annual scholarship reception that will be held on Saturday, April 21<sup>st</sup> @ 5:30pm. Recipient, parent(s) and or studio owner must be present.

This scholarship is **\$500** and will be provided to only one gifted and talented dancer at the start of their dance season at the dance studio where they are being trained. Deadline for applications is Friday, February 16, 2018 (postmarked).

The completed **video portion** and **colored professional jpeg formatted head shot** of the application should emailed to:

[ShufflinAlongLLC@yahoo.com](mailto:ShufflinAlongLLC@yahoo.com)

Please send the written application portion of the scholarship to:

**Shufflin' Along, LLC**  
**c/o Shufflin' Along Foundation**  
**POB 5242**  
**Shreveport, LA 71135**

If you have any questions please contact Roshanda Spears, Founding Executive Director, Shufflin' Along Foundation at 877-507-1913.



**Shufflin' Along Foundation & Performing Arts Scholarship Fund  
2018 "Dance Into Your Destiny" Local Dance Scholarship**

**Date of application** \_\_\_\_\_

**Date award is needed in fall of 2018** \_\_\_\_\_

**Name/age/birth date/school/hobbies of applicant** \_\_\_\_\_  
\_\_\_\_\_

**Telephone #** \_\_\_\_\_

**Contact name (parent/guardian)** \_\_\_\_\_

**Email address** \_\_\_\_\_

**Mailing address (city/state/zip code)** \_\_\_\_\_

**Name of dance studio applicant attends** \_\_\_\_\_

**Telephone #** \_\_\_\_\_

**Owner(s) of the dance studio** \_\_\_\_\_

**Email address** \_\_\_\_\_

**Mailing address (city/state/zip code)** \_\_\_\_\_

**How long have you studied dance at this studio** \_\_\_\_\_

**Provide a brief description of what sparked your interest in dance**

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**Provide a brief statement of why you deserve this award (financial need)**

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**Please provide ALL of the following via video and email to:**

**[ShufflinAlongLLC@yahoo.com](mailto:ShufflinAlongLLC@yahoo.com)**

- **ONE 45sec ballet combination (on pointe if applicable/black leotard and nude tights)**
- **ONE 45sec modern combination (no shoes/black leotards and tights)**
- **ONE 45sec jazz combination (black leotard/black jazz pants and black jazz shoes)**
- **ONE 45sec tap OR African combination (tap shoes OR no shoes)**
- **At the start of your video, you must state your first and last name, age, grade and what dance studio you attend**
- **Must email a professional color jpeg headshot**

## APPLICATION CHECKLIST:

Deadline to submit your application package is February 16, 2018:

**Application should be mailed to:**

**Shufflin' Along, LLC**

**ATTN: SAF Scholarship Fund**

**POB 5242**

**Shreveport, LA 71135**

**Videos and professional color jpeg headshot should be emailed to:**

[ShufflinAlongLLC@yahoo.com](mailto:ShufflinAlongLLC@yahoo.com)

### **Incomplete applications will not be reviewed.**

- \_\_\_ 1. **Application- all pages type-written, fully completed**
- \_\_\_ 2. Essays- two type written
- \_\_\_ 3. Video (**via email**) of the genres listed in this application/attire that displays your talent
- \_\_\_ 4. Professional color head shot-jpeg format (**via email**)

## **APPLICATION CERTIFICATION AND RELEASE INFORMATION:**

I certify that all information on this application is true and complete to the best of my knowledge. I certify that I meet all eligibility requirements as specified in this application and the accompanying instructions. I understand that application materials become the property of SAF&PASF (Shufflin' Along Foundation & Performing Arts Scholarship Fund) and will not be returned. I hereby authorize SAF&PASF to share or publish my application, photo and video for the purpose of evaluation, recruitment, public relations, possible employment, or any other related activity. I understand that I must notify SAF&PASF of any change in my enrollment status at my prospective dance studio. I also understand that a change in full-time status at my dance studio will result in the cancellation of any award.

Applicant's parent or guardian: \_\_\_\_\_

Date: \_\_\_\_\_